

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP		IND	DEP
1	1						51		
2	1						52		
3	1						53		
4	1						54		
5	1						55		
6		3					56		
7		3					57		
8		5					58		
9		5					59		
10		5					60		
11		5					61		
12		5					62		
13	1						63		
14	1						64		
15		5					65		
16							66		
17							67		
18							68		
19							69		
20							70		
21							71		
22							72		
23							73		
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34							84		
35							85		
36							86		
37							87		
38							88		
39							89		
40							90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	7						TOTAL IND.		
TOTAL DEP.	36						TOTAL DEP.		
TOTAL CLAIMS	43						TOTAL CLAIMS		